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**DECLARATION FOR UTILITY OR  
DESIGN PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted With Initial Filing

☒ Declaration Submitted after Initial Filing (surcharge 37 CFR 1.16 (e) required)

OR

Attorney Docket Number	WP 21690 US
First Named Inventor	LIST
COMPLETE IF KNOWN	
Application Number	10/539425
Filing Date	June 20, 2005
Art Unit	Unknown
Examiner Name	Unknown

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TRANSPORT DEVICE FOR TRANSPORTING TEST STRIPS IN AN ANALYTICAL  
SYSTEM

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **06/20/2005** as United States Application Number or PCT InternationalApplication Number **10/539425** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119 (a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Check Only If Priority Not Claimed	Certified Copy Attached?	
				YES	NO
PCT/EP2003/014709	WO	12/22/2003		<input type="checkbox"/>	<input checked="" type="checkbox"/>
10310935.8	DE	03/13/2003		<input type="checkbox"/>	<input checked="" type="checkbox"/>
02028894.0	EP	12/23/2002		<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Under the Paperwork Reduction Act of 1995, no persons are required to a collection of information unless it contains a valid OMB control number.

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below, and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number  Place Customer Number Bar Code Label Here

OR

☐ Registered practitioner(s) name/registration number listed below.

Name	Registration Number	Name	Registration Number

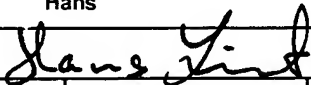
☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information Sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number Bar Code Label  OR ☐ Correspondence address below

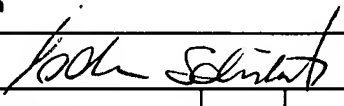
Name	Jill L. Woodburn				
Address	The Law Office of Jill L. Woodburn, LLC				
Address	128 Shore Dr.				
City	Ogden Dunes	State	Indiana	ZIP	46368-1015
Country	USA	Telephone	219-764-4005	Fax	219-764-4070

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.


Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor.

Given Name (first and middle [if any])				Family Name or Surname			
Hans				LIST			
Inventor's Signature				Date	22.08.2005		
Residence	City	Hesseneck-Kailbach	State	Country	Germany	Citizenship	German
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City			State		ZIP		Country

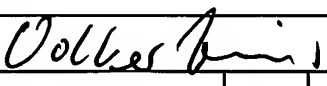
☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.


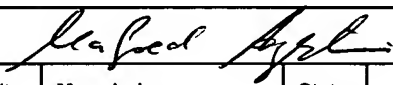
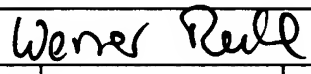
Name of Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.							
Given Name (first and middle [if any])						Family Name or Surname			
Jochen						SCHULAT			
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Name of Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.							
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Name of Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.							
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Name of Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.							
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Post Office Address									
City				State		ZIP		Country	

Name of Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.							
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Karl					MILTNER				
Inventor's Signature	Karl Miltnr					Date	01.09.2005		
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Post Office Address									
City				State		ZIP		Country	